

RECEIVED

CENTRAL FAX CENTER

Serial No. 09/740705
Attorney Docket No: 120-157

DEC 07 2004

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence is being facsimile transmitted to the
United States Patent and Trademark Office at number 703-872-9306

12/7/04

date

Lindsay G. McGuiness
SignatureLindsay G. McGuiness
Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Transmittal x 2	2 pages
Petition for Extension of Time x 2	2 pages
Amendment	12 pages
Total including this sheet	17 pages

Please type a plus sign (+) Inside this box

→

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

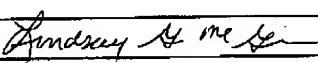
(to be used for all correspondence after initial filing)

		Application Number	09/740,705
		Filing Date	12/19/2000
		First Named Inventor	Schofield
		Group Art Unit	2633
		Examiner Name	Ngo
Total Number of Pages in This Submission		Attorney Docket Number	2204/A77 120-157 13252BAUS01U
		Nortel Docket No.	

ENCLOSURES *(check all that apply)*

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers <i>(for an Application)</i>	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) and letter	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i>
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) <i>(please identify below)</i> :
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
<p>Remarks</p> <p>Please charge any fee deficiency or credit any overpayment to Deposit Account No. 502569.</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Lindsay G. McGuinness, Reg. No. 38,549 Steubing McGuinness & Manaras LLP	
Signature		
Date	12/17/04	

CERTIFICATE OF MAILING OR FACSIMILE

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 22312 or being facsimile transmitted to the United States Patent and Trademark Office at number (703) 872-9306 on the date below.

Type or printed name	Carol Ann Mahoney	Date
Signature		12/17/04

Please type a plus sign (+) inside this box → +

PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

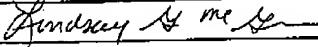
Total Number of Pages in This Submission

Application Number	09/740,705
Filing Date	12/19/2000
First Named Inventor	Schofield
Group Art Unit	2633
Examiner Name	Ngo
Attorney Docket Number	2204/A77 120-157
	13252BAUS01U

ENCLOSURES (check all that apply)

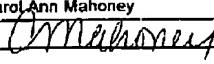
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) and letter	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	Please charge any fee deficiency or credit any overpayment to Deposit Account No. 502569.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Lindsay G. McGuinness, Reg. No. 38,549 Steubing McGuinness & Manaras LLP	
Signature		
Date	12/17/04	

CERTIFICATE OF MAILING OR FACSIMILE

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 33212 or being facsimile transmitted to the United States Patent and Trademark Office at number (703) 872-9306 on the date below.

Type or printed name	Carol Ann Mahoney	Date
Signature		12/17/04

Docket Number (Optional)

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

In re Application of: Schofield

Application Number 09/740705

Filed 12/19/2000

RECEIVED
CENTRAL FAX CENTERGroup Art Unit
2633Examiner
Ngo

DEC 07 2004

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$ 110.00
<input checked="" type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$ 430.00
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$ 980.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$ 1,530.00
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$ 2,080.00 <input type="checkbox"/>

Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.

A check in the amount of the fee is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

The Commissioner is hereby authorized to charge any fees and fee deficiencies which may be required, or credit any overpayment, to Deposit Account Number 502569.
I have enclosed a duplicate copy of this sheet.

I am the applicant/inventor

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
attorney or agent of record.

attorney or agent under 37 CFR 1.34(a).

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

12/17/04

Date

Lindsay G. McGuiness
Signature

Lindsay G. McGuiness, Reg. No. 38,549
Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number (Optional)

In re Application of: Schofield

Application Number 09/740705

Filed 12/19/2000

RECEIVED

CENTRAL FAX CENTER

Group Art Unit
2633Examiner
Ngo

DEC 07 2004

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate non-small-entity fee are as follows
(check time period desired):

<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 110.00
<input checked="" type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$ 430.00
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ 980.00
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$ 1,530.00
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$ 2,080.00 <input type="checkbox"/>
 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ _____.		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.		
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees and fee deficiencies which may be required, or credit any overpayment, to Deposit Account Number <u>502569</u> . I have enclosed a duplicate copy of this sheet.		

I am the applicant/inventor

assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
attorney or agent of record.

 attorney or agent under 37 CFR 1.34(a).

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

12/17/04

Date

Lindsay McGuiness

Signature

Lindsay G. McGuiness, Reg. No. 38,549

Typed or printed name

NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of _____ forms are submitted.

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.